

Supplemental Application Data Sheet

Application Information

Application number:: Not Yet Assigned 10/732,897
Filing Date:: Herewith 12/09/03
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R???:
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)??:
Number of copies of CRF::
Title:: SUBSTITUTED PIPERAZINES
Attorney Docket Number:: 019934-003720US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 26
Small Entity?:: Yes
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: United Kingdom
Status:: Full Capacity
Given Name:: Andrew
Middle Name:: M.K.
Family Name:: Pennell
Name Suffix::
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 148 Hancock Street
City of Mailing Address:: San Francisco
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94114

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: James
Middle Name:: B.
Family Name:: Aggen
Name Suffix::
City of Residence:: Burlingame
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1311 California Drive
City of Mailing Address:: Burlingame
State or Province of mailing address:: CA
Country of mailing address:: US

Postal or Zip Code of mailing address:: 94010

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Australia
Status:: Full Capacity
Given Name:: J.J.
Middle Name:: Kim
Family Name:: Wright
Name Suffix::
City of Residence:: Redwood City
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 720 Bair Road, Apt. 107
City of Mailing Address:: Redwood City
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94063

Applicant Authority Type:: Inventor
Primary Citizenship Country:: India
Status:: Full Capacity
Given Name:: Subhabrata
Middle Name::
Family Name:: Sen
Name Suffix::
City of Residence:: Sunnyvale
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 655 S. Fairoaks Avenue, #P-204
City of Mailing Address:: Sunnyvale
State or Province of mailing address:: CA

Country of mailing address:: US
Postal or Zip Code of mailing address:: 94086

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Brian
Middle Name:: E.
Family Name:: McMaster
Name Suffix::
City of Residence:: Mountain View
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 120 Walker Drive
City of Mailing Address:: Mountain View
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94086 94043

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Daniel
Middle Name:: Joseph
Family Name:: Dairaghi
Name Suffix::
City of Residence:: Palo Alto
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 178 El Dorado Avenue
City of Mailing Address:: Palo Alto

State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94306

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Valeri
Middle Name:: V.
Family Name:: Martichonok
Name Suffix::
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 433 Font Boulevard
City of Mailing Address:: San Francisco
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94132

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Designation::	Representative Number::	Representative Name::
Primary	30,223	William M. Smith
Primary	37,369	William B. Kezer

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

This Application is a CIP of: 10/460,752 06/11/03
and claims benefit Provisional 60/453,711 06/12/02
ef: 10/460,752 An Appn claiming
benefit under 35 USC
119(e) of

Assignee Information

Assignee Name:: ChemoCentryx, Inc.
Street of mailing address:: 1539 Industrial Road 850 Maude Avenue
City of mailing address:: San Carlos Mountain View
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94070 94043

Submitted by:

Signature William B. Kezer Date 4-29-09
Printed Name William B. Kezer Registration Number 37,369